

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	A.BOOIE	(S)	
O.I.P.E. CLASSIFIER			8-09-01
FORMALITY REVIEW	CJS	535	09-06-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	12/5
Original	1/8/7
	3/04
1	V/V
2	V/V
3	V/V
4	V/V
5	V/V
6	V/V
7	V/N
8	V/N
9	V/N
10	V/N
11	V/N
12	V/N
13	V
14	V
15	V
16	V/V
17	V/V
18	V/V
19	V/V
20	V/V
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Claim	Date
Final	51
Original	52
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Claim	Date
Final	101
Original	102
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If more than 150 claims or 10 actions  
staple additional sheet here

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